

LOCAL APPLICANT QUESTIONNAIRE
(NON-FAMILY MEMBER/NON-MILITARY)

AUTHORITY: Title 5, Code of Federal regulations, Sections 5.2 and 5.3; Title 5, USC, Sections 1303, 1304 and 3301; Sections 8(b), 8(c), and 9(c) of Executive order 10450; Title 42, USC, Sections 1434 and 2585.

PURPOSE: Used by civilian personnel specialist to make determinations regarding eligibility for employment with the US Forces and employment referral priorities.

NOTE: COMPLETION OF THIS FORM IS NOT MANDATORY, FAILURE TO COMPLETE THIS FORM WILL NOT IN ITSELF BE GROUNDS FOR DENIAL OF EMPLOYMENT; HOWEVER, FAILURE TO PROVIDE INFORMATION REQUESTED ON THIS FORM RESULT IN THE CIVILIAN PERSONNEL OFFICE BEING UNABLE TO DETERMINE ELIGIBILITY FOR EMPLOYMENT.

ROUTINE USES: Records from this system of records may be disclosed for any of the blanket routine uses published by the Department of defense. Furnishing the information is voluntary. If you do not give the requested information or give erroneous information, it may result in erroneous employment determinations and may be grounds for not employing you or dismissal after you begin work.

NAME: _____ SOCIAL SECURITY NUMBER: _____
(Last, First & MI)

PLACE OF BIRTH: _____ DATE OF BIRTH: _____
(City and State or Country) (Day/Month/Year)

SECTION: A TO BE COMPLETED BY ALL APPLICANTS

1. STATUS AND REASONS FOR BEING IN THE OVERSEAS AREA (Mark "x" and complete information where applicable).

a. _____ RETIRING/RETIRED

e. _____ OTHER (Explain, e.g., tourist, student, employed by private company, at cetera. If employed by a private company or a dependent of a person employed by a private company, be sure to include the company name including address. Complete Section E.)

2. US CITIZEN BY ☐ BIRTH ☐ NATURALIZATION (Give original citizenship) _____

3. PASSPORT NUMBER AND DATE OF ISSUE _____

SECTION B. TO BE COMPLETED BY FORMER MILITARY MEMBERS

4. DATE OF SEPERATION: WAS _____ 15. PLACE OF SEPERATION: WAS _____

5. REASON FOR SEPERATION: WAS _____ WILL BE _____

6. MILITARY TRANSPORTATION ENTITLEMENT

☐ WAS USED

☐ WILL BE USED

☐ WILL NOT BE USED

SECTION E

7. LIST DATE OF ORIGINAL ARRIVAL IN KOREA AND ALL ENTRANCES TO AND EXITS FROM KOREA FOR THE LAST FIVE YEARS.

8. CURRENT RESIDENCE

_____ OWNED HOUSE, APT, ETC. (By applicant or family members, including in-laws)

_____ RENTED HOUSE, APT, ETC., SINCE _____ CURRENT LEASE EXPIRES _____

_____ OTHER (Give details in section F.)

9. DO YOU HAVE A PLACE OF RESIDENCE IN THE U.S. OR THIRD COUNTRY? ☐ NO ☐ YES (Give full street address including zip code)

- a. IS THE U.S. OR THIRD COUNTRY RESIDENCE A HOUSE OR APARTMENT? _____ HOUSE _____ APARTMENT
- b. WHO IS LIVING IN THE U.S. OR THIRD COUNTRY RESIDENCE AT PRESENT? _____
- c. WHAT IS THE RELATION OF THAT PERSON OR PERSONS TO THE APPLICANT? _____
- d. IF THE U.S. OR THIRD COUNTRY RESIDENCE IS A HOUSE WHO IS THE LEGAL OWNER OR WHOSE NAME IS ON THE TITLE? _____
- e. IS THERE A PHONE IN THE U.S. OR THIRD COUNTRY RESIDENCE? NO _____ YES _____ GIVE PHONE NUMBER _____
10. LOCAL RESIDENT: PERMIT TYPE AND EXPIRATION _____
VISA TYPE AND DATE OF EXPIRATION _____
11. DO YOU HAVE, OR HAVE YOU EVER HAD, A LOCAL WORK PERMIT? _____ NO _____ YES (Give details in Section F)
12. HAVE YOU WORKED ON THE LOCAL ECONOMY? _____ NO _____ YES (Give details in Section F)
13. IS YOUR HOUSEHOLD GOODS IN STORAGE? _____ NO _____ YES (If YES, Where?) _____
14. WHO IS PAYING FOR YOUR HOUSEHOLD GOODS IN STORAGE? _____
15. _____ I AM NOT MARRIED _____ I AM MARRIED AND MY SPOUSE _____ IS _____ IS NOT WORKING ON THE LOCAL ECONOMY
WHAT IS YOUR SPOUSES NATIONALITY AND RESIDENCE? _____
16. DO YOU, OR YOUR SPOUSE, OWN REAL PROPERTY OR AN INTEREST IN A BUSINESS IN KOREA?
_____ NO _____ YES (If Yes, explain in Section F)
17. DO YOU HAVE A DRIVER'S LICENSE ISSUED BY KOREAN AUTHORITIES? _____ NO _____ YES
18. HAVE KOREAN AUTHORITIES EVER TAXED YOUR INCOME? _____ NO _____ YES
19. DO YOU HAVE A RETURN TICKET TO THE U.S.? _____ NO _____ YES (Give Date of Flight) _____ IF OPEN, TICKET EXPIRES (Give date) _____
20. DO YOU HAVE A CURRENT U.S. OR THIRD COUNTRY VOTER REGISTRATION? NO _____ YES _____
WHAT STATE / PROVINCE / ETC? _____ (GIVE REGISTRATION NUMBER) _____
22. DO YOU HOLD A CURRENT U.S. OR THIRD COUNTRY DRIVER'S LICENSE? NO _____ YES _____
WHAT STATE / PROVINCE? _____ (GIVE DRIVER'S LICENSE NUMBER) _____

APPLICANT'S NAME (Printed)

DATE _____